

PART B - FEE(S) TRANSMITTAL

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25944 7590 08/21/2007

OLIFF & BERRIDGE, PLC
 P.O. BOX 19928
 ALEXANDRIA, VA 22320

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/507,523	02/22/2005 12/15/2004	Kazuhiko Mouri	121014	6728

TITLE OF INVENTION: HOLLOW-WEAVE AIRBAG

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/21/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	10/12/2007 CNOVEN3 00000017 10-07523		
SINGH, ARTI R		1771	139-38400R	01 FC:1301 1440.00 CP 02 FC:1520 322.00 CP		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Toyota Boshoku Corporation
 Toyota Gosei Co., Ltd.
 Toyota Jidosha Kabushiki Kaisha

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kariya, Japan
 Nishikasugai, Japan
 Toyota, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☒ A check is enclosed. ck# 197859
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Timothy Smith

Date October 11, 2007

Typed or printed name Timothy Smith

Registration No. 58,355

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